COURT ORDER 89-374-05-22

130 932

COLLIN COUNTY PERSONNEL ACTION FORM

						•	• DATE:		
NAME: KREMPP		POLLY			С.			-19-89	
NAME: REPIPE			FIRST		MIDDLE			PARTMENT:	
SOCIAL CEC NO.	427-62-1774						Τε	ax Assessor	
SOCIAL SEC. NO.:									
EMPLOYMENT	Employment Date:	Job Titl		/p =	- 1. \			SALARY:	
	5-22-89		Bookkeeper		7/A)			\$1423.00	
Previously Employed:	Orginial Employme	nt Date.	Separation Date:		pervisor:			SALARY:	
ELIGIBILITY DATES: (For Office Use Only)	Vacation Days:	-				Insuran (Medica		Self Dependents	
	Current Job Title			•	Current Salary	у	Range	Step	
Salary and/or title change	New Job Title				New Salary		Range	Step	
Reason: Satisfactory P	erformance Uns	atisfacto	ory Performance □ E	Except	tional Merit				
TRANSFER	FROM:	FROM: TO:			Sick	Dates of Sick Leave:			
LEAVE OF ASSENCE Give Reason	LEAVE OF ABSENCE FROM:				Previous D This Year: Was Docto		·: ·	k Leave Taken	
RETURN	DATE:		□ Ins. Notified			Was Doct Furnished		ement □ Yes □ No	
VACATION	Date Requested - Fr	om:	To:			Total Wo	_	Previous Days Taken This Year	
SEPARATION	Employment Date		Last Day Worked		IR	Rehire?	Yes 🗆	No Explain	
Vac. Pay No. Hrs.	Amt. Paid	Comp. No. Hrs					<u>-</u>		
 □ Voluntary Retirement □ Mandatory Retirement □ Death □ Illness or Injury □ Leaving Area □ Accept Other Job □ Dissatisfied How Many Days Advance N 	. Co. Policy	☐ Fam ☐ Res ☐ Red ☐ Hab ☐ Unr	turn To School mily Problems signation For Other Rea duction In Force bitually Absent or Tardy reported Absence aving Work Without Peri	у		Reporting Drinking Destruction Falsification	g Under li on Duty [®] ion or Rer ion of Coluct	nfluence of Alcohol moval Of Co. Property unty Records comments)	
COMMENTS: Positi	on to terminat	e 9-30	0-89, unless ap	prov	red for cor	ıtinuati	on by	Commissioners	
Court.									
Dated this 22nd	day of MAY	<u>.</u> 25	, 1 <u>9</u> _89		EF	FECTIVE	E DATE:		
				_ ' /-	DATE /	when	RTMENT HE	Lindberg	